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CONFIRMATION NO. 8737

<b>SERIAL NUMBER</b> 10/531,425	<b>FILING OR 371(c) DATE</b> 03/03/2006 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1645	<b>ATTORNEY DOCKET NO.</b> BEP 3009
<b>APPLICANTS</b> Michel P Rathbone, Hamilton, ON, CANADA; Shucui Jiang, Hamilton, ON, CANADA; Jian Wang, Hamilton, ON, CANADA; Pamela Middlemiss, Hamilton, ON, CANADA; Mohammad Imtiaz Khan, Hamilton, ON, CANADA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/CA03/01549 10/15/2003 which claims benefit of 60/418,167 10/15/2002				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> ON	<b>SHEETS DRAWING</b> 13	<b>TOTAL CLAIMS</b> 16
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> 30868				
<b>TITLE</b> Use of enteric glia to promote functional nerve connections				
<b>FILING FEE RECEIVED</b> 515	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	